MAY 2 2 2006

| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | | Docket Number D2487 |
|---|------------------------|---|------------------------|
| I hereby certify that this correspondence is being sent via facsimile | In re Application of | Marc W. | Kauffman |
| on Way 22, 2006 | Application Number | 09/734,220 | |
| ~1 | Filed | 12/11/200 | 00 |
| Signature South | For | Seamless Arbitrary Data Insertion for Streaming Media | |
| Typed or printed name Carol J. Smith | Art Group | 2145 | |
| | Examiner | Thomas I | Duong |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | | |
| The fee for this Notice of Appeal is (37 CFR 1.17(b)) | | \$. | 500.00 |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | | |
| A check in the amount of the fee is enclosed. | | | |
| Payment by credit card. Form PTO-2038 is attack | ched. | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | | |
| X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 502117. I have enclosed a duplicate copy of this sheet. | | | |
| A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit care information and authorization on PTO-2038. | | | |
| l am the . 05/23/2006 STEUMEL1 000 | 000038 502117 09734220 | ./ | |
| applicant/inventor. # 01 FC:1401 500.0 | | The | |
| assignee of record of the entire interest. | | Signal | ture |
| See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) Lawrence T. Cullen Typed or printed name | | | |
| X attorney or agent of record. Registration number 44,489 | | 215-323- Telep | -1797 hone number |
| Attomey or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). | (a) | 5/22 | 106 Date |
| NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| * Total of forms are submitted. | | | |

This collection of information is required by 37 CFR 1.91. You information is required to obtain or retain a benefit by this public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 reinvites to complete, including gathering, preparing, and submitting the completed application form to by USPTO. Then will very depending upon the Individual case. Any comments on the smeunt of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patient and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: